



Performance Measurement Tool User Guide

Victim Assistance
Subgrantees



Overview

- **Grantee:** the primary grant recipient of funds directly from OVC or State Administrative Agency (SAA).
- **Subgrantee:** an entity that has a formal relationship with the grantee or the primary grant recipient that it receives funds from. This relationship may be established through an MOU, a contract, or a competitive grant process.

Overview

REPORTING PERIODS

Quarterly: The PMT collects data for a 3-month period. Your grantee will determine your quarterly due dates for entering data in the PMT. Quarterly reporting is only for your Performance Measures data.

Overview

Subgrant Award Report (SAR)

- SARs need to be completed for each subaward a subgrantee receives. The grantee must complete a portion of the SAR. The SAR may be completed by either the subgrantee or grantee. If the subgrantee completes the SAR, it must be approved by the grantee.

Performance Measurement Data Report

- Performance measures reporting needs to be completed for each subgrantee every 3 months. Reporting performance data may be completed by either the subgrantee or grantee. If the subgrantee completes the performance measures, it must be approved by the grantee.

Reporting Schedule

Reporting Period	Type of Data Required	Due Date
October 1–December 31	Program Performance Measures	Grantee defined
January 1–March 31	Program Performance Measures	Grantee defined
April 1–June 30	Program Performance Measures	Grantee defined
July 1–September 30	Program Performance Measures & Annual Questions	Grantee defined

Login



U.S. DEPARTMENT OF JUSTICE
Office of Justice Programs
Innovation • Partnerships • Safer Neighborhoods

Performance Measurement Platform

User Name **Password** [Forgot Password](#)

Please note: JavaScript must be enabled to use this site. If not, site navigation will not work properly. If you need to enable JavaScript, click [here](#) to find out how.

BJA **OVC** **OJJDP** **NIJ**

Privacy | FOIA

<https://www.ovcpmt.org>

User Account

General Profile

Last Name:
 First Name:
 Email Address:
Also used as a User Name for signing onto the system
 Phone Number:

Security Profile

Security Challenge:
A word, phrase, statement, or question (up to 75 characters in length) the answer to which may aid in verifying your identity. Used for resetting password.
 Security Response:
Response to Challenge recorded above. If you have already set your response, leaving this field blank will preserve your previous setting.
 Verify Security Response:
 Create Password:
 Verify Password:

Required Entry

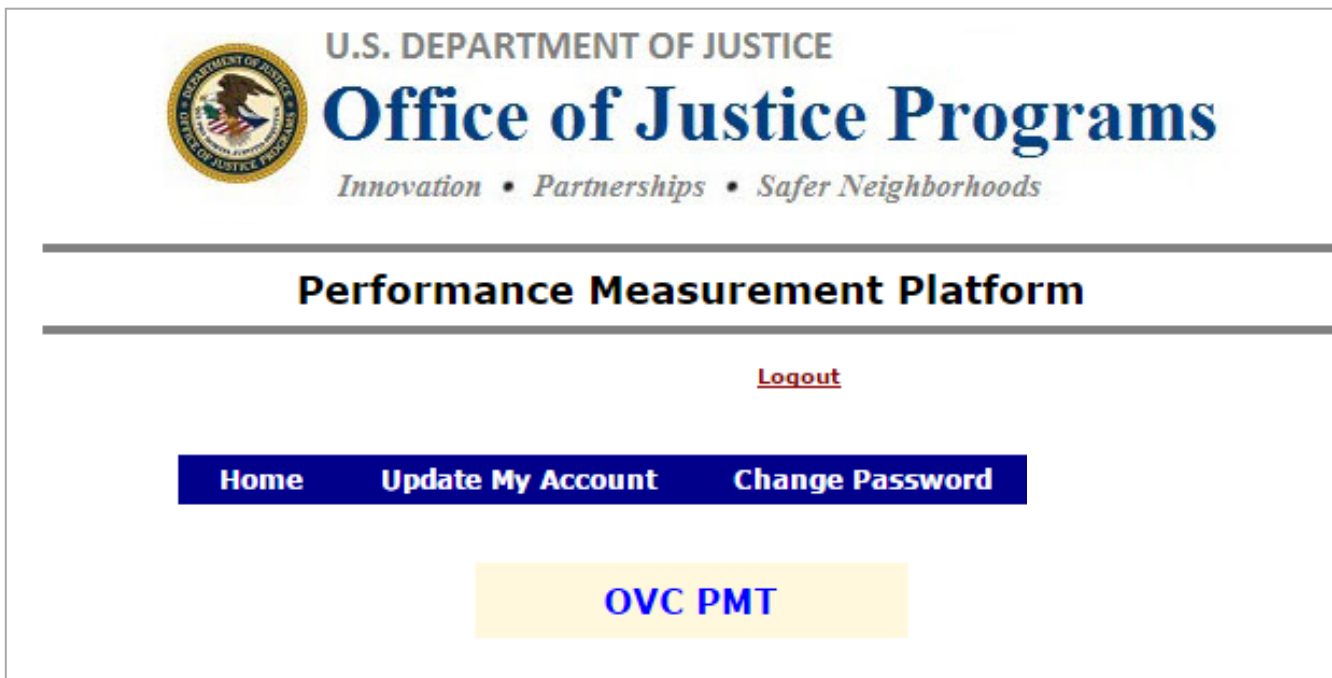
Passwords must conform to the following requirements:

*At least 12 characters in length
 Contains alpha characters of both upper and lower case -- at least one of each
 Contains at least one number
 Contains at least one special character, as follows:*

*~ ! @ # \$ % ^ & * () - _ + ` { } | : < > ? [] \ ; " , . /*

- If your grantee allows access for you as the subgrantee to enter data into the PMT, you will receive an e-mail from OVC PMT with instructions on how to create a user account. You'll be able to add other users for your subgrantee organization later in the process. Enter information in all required fields, and click **Update** to continue.

User Account



The screenshot shows the user account interface for the Office of Justice Programs. At the top left is the U.S. Department of Justice seal. To its right, the text reads "U.S. DEPARTMENT OF JUSTICE" in a small font, followed by "Office of Justice Programs" in a large, bold, blue font. Below this is the tagline "Innovation • Partnerships • Safer Neighborhoods". A horizontal line separates this header from the main content area, which is titled "Performance Measurement Platform" in bold black text. Below the title, there is a red "Logout" link. A dark blue navigation bar contains three buttons: "Home", "Update My Account", and "Change Password". At the bottom center, there is a yellow button labeled "OVC PMT".

- Here you can update or change your account and password information.
- Click on **OVC PMT** to continue.

Profile

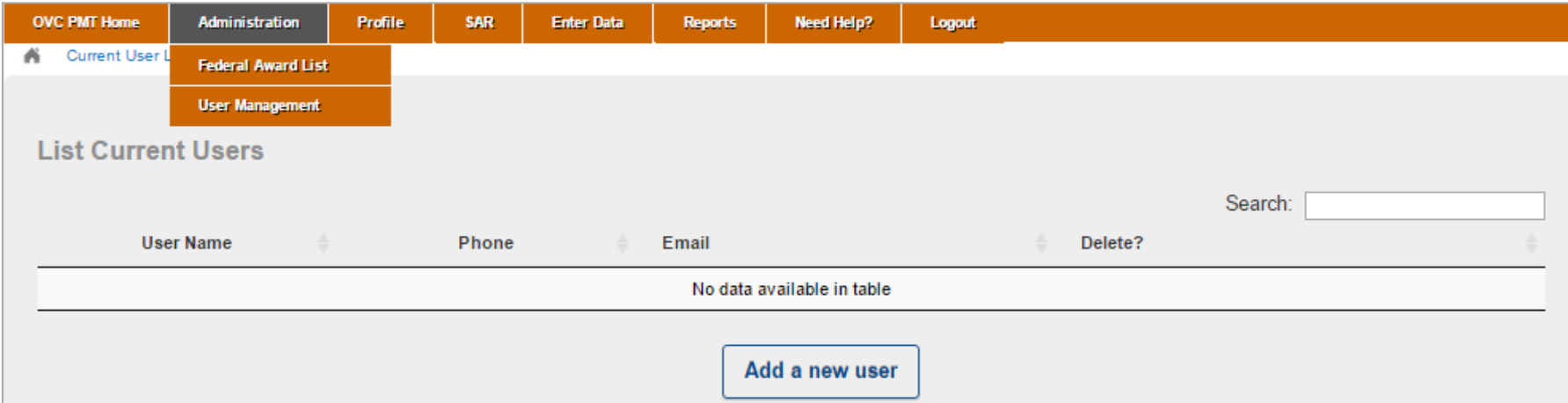
Select a profile:

VICTIM ASSISTANCE

- AL - 2nd Chance, Inc.

Select your organization.

Administration



The screenshot displays the OVC PMT Administration interface. The top navigation bar includes links for OVC PMT Home, Administration, Profile, SAR, Enter Data, Reports, Need Help?, and Logout. The Administration menu is expanded, showing options for Federal Award List and User Management. The main content area is titled "List Current Users" and features a search box and a table with columns for User Name, Phone, Email, and Delete?. The table currently displays "No data available in table". A button labeled "Add a new user" is located at the bottom of the interface.

- Click **Administration** and **User Management** to manage the users associated with your subgrantee organization.
- To add a new user, click **Add a new user**.

Administration

Create New User Form

First Name:

Last Name:

Email: (format: joe@smith.com)

Phone: (format: (999)999-9999x999)

- After entering new user information, click **Save** to create a new user.
- All new users will automatically receive an e-mail asking them to set up their own unique password and security information in the system. All individual users must have their own unique log in to access the system.

Subaward List

OVC PMT Home	Administration	SAR	Enter Data	Reports	Need Help?	Logout
SAR for Subaward JJ Award (In Progress)						

- Under the **SAR** tab is a list of your SARs for each subaward.
- Click the tab for the specific subaward to enter data for it.

SAR Part 2

Organization: **2nd Chance, Inc.**

SAR - PART1

SAR - PART2

7. SERVICE AREA (S):

All Counties ✕

Other:

8. SUBGRANT MATCH (FINANCIAL SUPPORT FROM OTHER SOURCES)

A. Value of in-kind match:

B. Cash match:

C. Total match: (auto-calculated)

D. Match waiver (full or partial):

9. USE OF VOCA AND MATCH FUNDS:

- You will only be able to enter data for **SAR – Part 2**. You can click the **SAR – PART 1** tab to see the fields your grantee (state agency) answers. Click **Save & Continue** at the bottom of the page once you have entered data for all fields.

SAR Part 1

SAR - PART1

FEDERAL AWARD NUMBER: **(REQUIRED)**

1. SUBGRANTEE AGENCY NAME:

- A. Agency Name : 2nd Chance, Inc.
- B. Agency Address : Post Office Box 2714
- C. City : Anniston
- D. State : AL
- E. Zip Code : 36202-2714

2. SUBGRANTEE AGENCY POINT OF CONTACT :

- A. POC Name : Melvin Dunn
- B. Phone Number : (256) 236-7383
- C. E-mail : mdunn1151@gmail.com

3. SUBGRANTEE ORGANIZATION TYPE :

Nonprofit Organization Only - Organization Provides Domestic and Family Violence and Sexual Assault Services

- If you click **SAR - PART1**, you'll be able to see which fields your grantee still needs to enter. These are the fields marked **Required**. If fields are missing, you'll need to contact your grantee (state agency).

SAR Review

[Subgrantee List](#) [Subgrantee Contact](#) [Subaward List](#) [Subaward Deta](#) [SAR](#) [Review](#) [Collapse All](#) [Expand All](#)

[Print](#)

Office for Victims of Crime
Victim Assistance Formula Grants Program
SUBGRANTEE AWARD REPORT (SAR)

FEDERAL AWARD NUMBER: 2013-VA-GX-0051

1. SUBGRANTEE AGENCY NAME:

- A. Agency Name : CRIME VICTIMS EMERGENCY TRASPORTATION PROGRAMS
- B. Agency Address : ASG EOB-3RD FLOOR
- C. City : PAGO PAGO
- D. State : AS
- E. Zip Code : 96799-9999

2. SUBGRANTEE AGENCY POINT OF CONTACT :

- A. POC Name : Tester
- B. Phone Number : (684) 633-5221
- C. E-mail : Test@csrincorporated.com

3. SUBGRANTEE AGENCY TYPE :

Government Agencies Only - Courts

Once the SAR is complete and you clicked **Save & Continue** on the previous page, you'll see the Review page.

SAR Review

C. ANNUAL funding amounts allocated to victim assistance projects for the current fiscal year:

State: (Required)

Local: (Required)

Other Federal: (Required)

Other non-federal: (Required)

D. Total organization/agency staff for all victimization programs/services: (Required)

E. Number of FTE staff funded through this VOCA award: (Required)

F. Number of volunteer hours supporting the work of this VOCA award: (Required)

Mark SAR as complete and approve it for data entry.

SAVE

Additional Comments

You have 500 characters left. (Maximum characters: 500)

If any fields are marked **Required**, you will not be able to save and complete the report.

SAR Review

Mark SAR as complete and approve it for data entry. SAVE

Additional Comments

You have characters left. (Maximum characters: 500)

After completing all missing or required fields for **SAR – Part 2**, mark the SAR as complete, and click **Save** to complete it for data entry.

SAR Review

SAR Review SAR data has been finished and successfully locked. Grantee will review it.

Office for Victims of Crime
Victim Assistance Formula Grants Program
SUBGRANT AWARD REPORT (SAR)

FEDERAL AWARD NUMBER: 2013-VA-GX-0026

1. SUBGRANTEE AGENCY NAME:

A. Agency Name : 2nd Chance, Inc.
B. Agency Address : Post Office Box 2714
C. City : Anniston
D. State : AL
E. Zip Code : 36202-2714

- Once you click **Save**, you'll see a message that says your data has been certified.
- Your grantee will still need to approve this before you can enter Performance Measures data.

Performance Measures

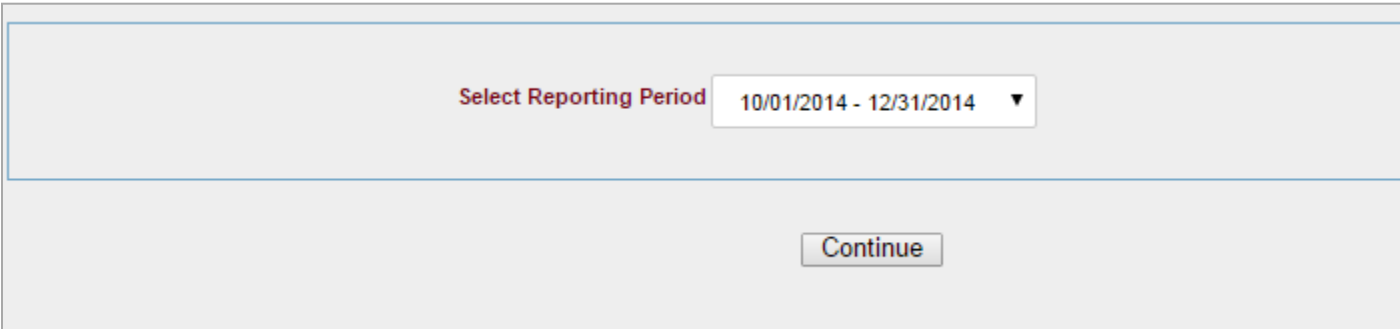
OVC PMT Home	Administration	SAR	Enter Data	Reports	Need Help?	Logout
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Please complete all SARs and get approval from grantee to enter performance measure data.

[Go to SAR selection page](#)

If you complete your SAR, you still need it approved by your grantee before you are able to continue. Please contact your grantee (state agency) if you have finished SAR data entry but still get this message.

Performance Measures



Select Reporting Period 10/01/2014 - 12/31/2014 ▼

Continue

Once all your SARs are completed and approved by your grantee, this will appear on the **Enter Data** page. Select the reporting period you want to enter data for, and click **Continue**.

Population Demographics

POPULATION DEMOGRAPHICS	DIRECT SERVICES	SUBGRANTEE ANNUALLY REPORTED QUESTIONS	REVIEW
<p>The purpose of the demographic data is to provide OVC with a description of the crime victim population that is the basis for compensation benefits in your state.</p> <p>Application: A form received by the program from or on behalf of a victim or a family member. The definition does not include requests for benefits but only the initial application filed.</p> <p>Crime Victim or Victim of Crime: A person who has suffered physical, sexual, financial or emotional harm as the result of...</p>			
1. TOTAL number of individuals who received services during the reporting period. <input type="text" value="Number"/>			
2. Is your agency able to track individuals on an annual basis by federal fiscal year? <input type="text" value="Number"/>			
3. Is your agency able to identify "new" individuals who did not receive services from your agency during the previous reporting period? <input type="text"/>			
4. Number of NEW individuals who received services from your agency for the first time during the reporting period. <input type="text" value="Number"/>			
5. Victim Demographics			
<input type="button" value="Save & Continue"/>		<input type="button" value="Exit Data Entry"/>	

Complete all the records under the **Population Demographics** section. All fields marked **Number** will only accept numeric values. You will not be able to enter any commas or other special characters. Press **Save & Continue** at the bottom of the page.

Direct Services

Reporting Period: 10/01/2014 - 12/31/2014

POPULATION DEMOGRAPHICS **DIRECT SERVICES** SUBGRANTEE ANNUALLY REPORTED QUESTIONS REVIEW

8. Number of individuals assisted with a victim compensation application during the reporting period.

9. Select the types of services provided by your organization during the reporting period:

- A. Information & Referral
- B. Personal Advocacy/ Accompaniment
- C. Emotional Support or Safety Services
- D. Shelter/ Housing Services
- E. Criminal/ Civil Justice System Assistance

10. Information & Referral

A1. Information about the criminal justice process

A2. Inform

A3. Refer

A4. Referral to other services, supports, and resources (includes legal, medical, faith-based organizations, address

Instruction

Enter the number of times a service was provided in each subcategory listed.

Answer all fields under the **Direct Services** tab. Underlined text in the system is a hyperlink to a definition that you can click on for additional instructions. *The specific services listed in A-E are as defined by your state.*

Subgrantee Annually Reported Questions

Reporting Period:10/01/2014 - 12/31/2014

POPULATION DEMOGRAPHICS

DIRECT SERVICES

SUBGRANTEE ANNUALLY REPORTED QUESTIONS

REVIEW

15. Number of requests for services that were unmet because of organizational capacity issues.

Number

Save & Continue

Answer the **Subgrantee Annually Reported Questions** during the July-September reporting period. Click **Save & Continue** at the bottom of the page once you have entered your answers.

Performance Measures Review

Category	Question	Option	Response	Alert
POPULATION DEMOGRAPHICS	1.TOTAL number of individuals who received services during the reporting period.			Required
	2.Is your agency able to track individuals on an annual basis by federal fiscal year?			Required

Once you are finished with performance measures data entry, you will be prompted to go to the Review page. If any fields are missing, they will be marked **Required**. Click **Required** to go to the missing or incorrect field.

Performance Measures Review

REVIEW

Mark data entry as complete. The record will be locked for further data entry.

SAVE

Additional Comments

You have characters left. (Maximum characters: 600)

**Once data entry is complete for a reporting period, you can view performance data reports here.*

If all fields are complete, mark the data as complete by clicking the checkbox, and click **Save**.

Reports

OVC PMT Home

Administration

SAR

Enter Data

Reports

Need Help?

Logout

If any changes are made to the data, please remember to again mark data entry as complete to recreate the PDF. Replace the previous version in your files.

Report Period	Data Entry Status	Last Modified	View Reports	
			Quarterly	Accumulated
10/01/2014 - 12/31/2014	In Progress			

You will be able to create PDF reports of your own performance measures data each quarter on the **Reports** page after you complete all your subgrantee data entry.

What if?

I need to edit data submitted in a previous report?

- Contact your grantee to request that it sends your record back to you for revisions.

I lost my data!

- Please be aware that your **session in the PMT will time out 30 minutes after you stop saving data**. To avoid reentering data, click the **Save** button before leaving the system unattended or when you're finished entering data.

Questions?

- For SAR and program performance measures data reporting requirements and deadlines, contact your grantee or your State Administrative Agency (SAA).
- For questions about the PMT, contact the OVC PMT Help Desk via e-mail at:
ovcpmt@csrincorporated.com
or by phone at: **1 (844) 884-2503**.